

# Report on the Health Status of Older Adults

## Coconino County, Arizona

Established by the Arizona Department of Health Services (ADHS), the Healthy Aging 2010 project focuses on issues related to health promotion and disease prevention in older adults. While the older adult population in Arizona is living longer, older adults are not necessarily living healthier lives. Chronic diseases occurring in conjunction with emotional health problems are the most prevalent yet preventable health problem in the State. An analysis of available indicators of older adult health provides information for planning and community initiatives. The following information and data describe the current health status of adults 65 years of age and older living in Coconino County.

### *Population Characteristics*

Table 1 presents information about the characteristics of older adults living in Coconino County, as compared to Arizona and the United States. The 2001 population figures were estimated based on the 2000 U.S. Census. Approximately 7% of the total population in Coconino County is over the age of 65, compared to 13.0% for the state and 12.4% for the United States. For all regions, the proportion of females is higher than males within the 65 and older age group.

**TABLE 1: POPULATION ESTIMATES \* FOR 2001**

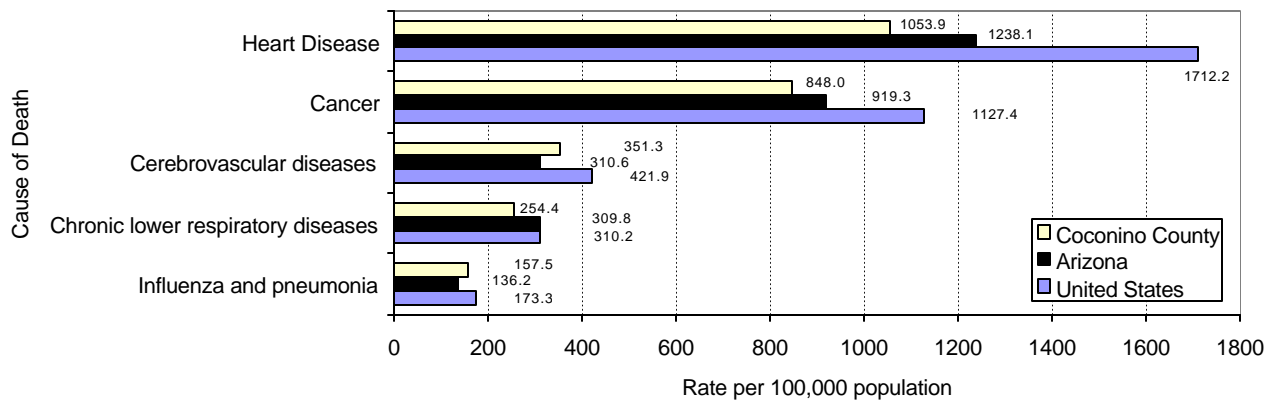
	Coconino County	Arizona	United States
Total Population	117,916	5,307,331	284,796,887
Age 65+ Population	8,255 (7.0%)	690,995 (13.0%)	35,411,395 (12.4%)
Gender, Age 65+			
Male	3,785 (45.9%)	306,535 (44.4%)	14,582,434 (41.2%)
Female	4,470 (54.1%)	384,460 (55.6%)	20,828,961 (58.8%)
Race/Ethnicity, Age 65+			
Caucasian, non-Hispanic	5,459 (66.1%)	599,209 (86.7%)	29,595,582 (83.6%)
Hispanic	649 (7.9%)	57,413 (8.3%)	1,754,381 (5.0%)
African American	145 (1.8%)	10,053 (1.5%)	2,856,805 (8.1%)
American Indian	1,922 (23.3%)	14,360 (2.1%)	140,099 (0.4%)
Asian	47 (0.6%)	6,454 (1.0%)	810,399 (2.3%)
Other	25 (0.3%)	3,506 (0.5%)	254,130 (0.7%)

\*Estimates calculated based on the 2000 U.S. Census

### *Mortality and Hospitalizations*

The five leading causes of death among adults age 65 and older in Coconino County for 2001 are shown in Figure 1. Since national death rates are not currently available for 2001; U.S. preliminary death data for the year 2000 are included in the figure for the purpose of a general comparison. Coconino County reported lower death rate than Arizona for all categories, excluding deaths due to cerebrovascular disease and influenza/pneumonia. Among older adults in all regions, heart disease and cancer are the leading causes of death. Lung cancer is the leading cause of cancer deaths both county and statewide; Coconino County reported a 29% lower death rate than Arizona in 2001.

**FIGURE 1: FIVE LEADING CAUSES OF DEATH AMONG ADULTS AGE 65 AND OLDER; MORTALITY RATE PER 100,000**



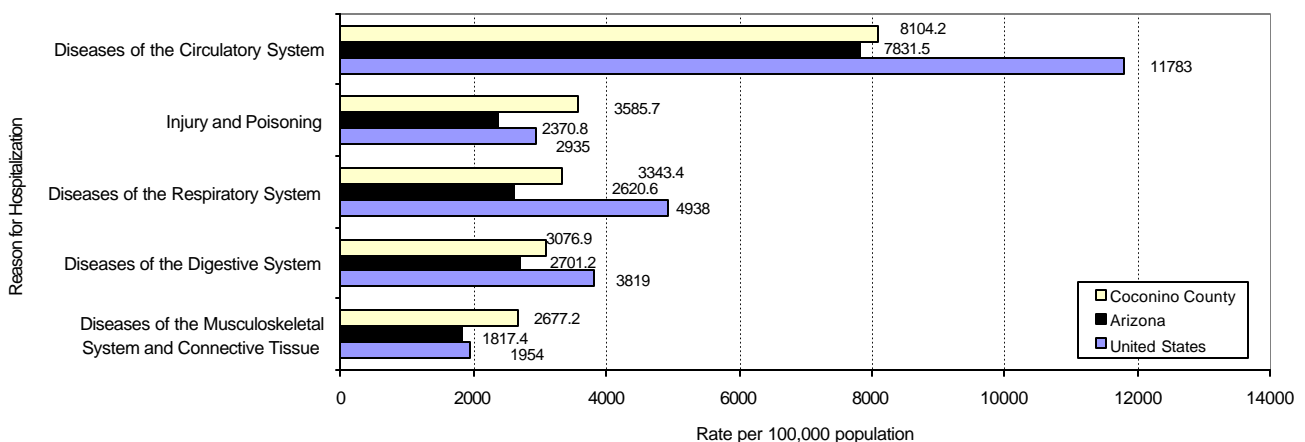
Source: Advance Vital Statistics Report. Arizona Department of Health Services: 2001.

Note: Corrections have been made to reassign reported deaths in Arizona counties originally listed as unknown.

National Vital Statistics Report, Deaths: Preliminary Data for 2000. Centers for Disease Control and Prevention: 10/2001.

Figure 2 depicts the five leading causes of hospitalizations among older adults in non-federal facilities in Coconino County, Arizona, and the United States, based on primary ICD9 diagnosis codes. While county and state data reflect hospitalizations during the year 2001, but because national hospital discharge data are not currently available for 2001, U.S. data for the year 2000 are included for the purpose of a general comparison. Federal facilities, such as Indian Health Services and Veterans Affairs hospitals, are not included within these data, and care must be given when considering hospitalizations within these populations. Also hospitalization data do not include treatment in emergency departments or outpatient facilities. Additionally, it is important to note that hospital discharge data describe the number of hospitalizations, rather than individuals; one individual may be represented multiple times within the data if that individual was hospitalized on multiple occasions within the same year.

**FIGURE 2: FIVE LEADING CAUSES OF HOSPITALIZATION AMONG ADULTS AGE 65 AND OLDER; HOSPITALIZATION RATE PER 100,000**



Source: 2001 Hospital Discharge Data. Arizona Department of Health Services.

Advance Data from Vital and Health Statistics, 2000 National Hospital Discharge Survey. Centers for Disease Control and Prevention: 6/2002.

For all categories, the hospitalization rate in Coconino County was higher than the rate reported for Arizona, with the largest difference in hospitalizations due to injury and poisoning. In considering diseases of the circulatory, respiratory, digestive, and musculoskeletal/connective tissue systems individually, the leading medical condition within each category resulting in hospitalization for older adults countywide was heart disease, pneumonia, gallstones, and arthritis, respectively. Within the injury and poisoning category, hip fractures were the most frequently diagnosed medical condition, and falls were reported as the main cause of injury. The average length of stay in the hospital among older adults in Coconino County was 5.3 days, compared to 4.7 days for Arizona and 6.0 days nationally (year 2000 data). The average hospitalization charges for Coconino County seniors in 2001 was \$20,780, compared to \$21,289 for the state; national figures are not available. Cumulative data indicates that Coconino County seniors incurred total hospitalization costs equaling \$52,281,887 for the year 2001.

## ***Risk Factors***

In considering leading chronic health conditions and mortality, it is important to keep in mind the role that risk factors play in health. The Behavioral Risk Factor Surveillance Survey (BRFSS), established by the Centers for Disease Control, is a national telephone survey that polls individuals about specific high-risk behaviors, and is a useful tool in assessing the general health of the population.

Through the use of random dialing, the survey provides a representative cross-section of the national population. On a local level, however, the BRFSS is limited in its ability to represent the population, due to small sample sizes. Additionally, individuals not having a telephone within their household are excluded from participation, which in Arizona includes approximately 6% of the total population. **Thus, BRFSS data reported for the county is not representative of the county population as a whole, and caution must be used in interpreting data beyond the context of the surveyed population.** Despite their limitations, BRFSS data nonetheless provide general indicators about a community's health status. Table 2 describes demographic characteristics of the surveyed BRFSS population in 2000.

**TABLE 2: CHARACTERISTICS OF RESPONDENTS ON THE BRFSS 2000, ADULTS 65+**

	Coconino County	Arizona	United States
Number of respondents, ages 65+	31	624	34087
Gender			
Male	11 (35.5%)	245 (39.3%)	11913 (34.9%)
Female	20 (64.5%)	379 (60.7%)	22174 (65.1%)
Race/Ethnicity			
Caucasian, non-Hispanic	26 (83.9%)	566 (90.7%)	28915 (84.8%)
Hispanic	2 (6.5%)	45 (7.2%)	1977 (5.8%)
Black	2 (6.5%)	5 (0.8%)	1764 (5.2%)
American Indian	0	5 (0.8%)	332 (1.0%)
Other	1 (3.2%)	3 (0.5%)	1099 (3.2%)
Mean Age (Years)	71.5	73.8	74.0

Of the 31 older adults surveyed in Coconino County, 45.2% described their general health status as very good or excellent, as compared to 41.3% for the state and 35.4% for the United States. Two surveyed adults (6.5%) in the county described their general health as poor, a slightly lower rate than those reported for the state and the United States, 8.8% and 9.6% respectively.

Being overweight or obese, poor dietary habits, little or no physical activity, and tobacco use are all associated with an increase in health problems. As shown in Table 3, according to the 2000 BRFSS, 32.2% of the surveyed older

adults in Coconino County are classified as overweight or obese by national health standards, and 22.6% of respondents reported current attempts at losing weight. Over half of the respondents in Coconino County (58%) reported that they did not consume the recommended 5 or more servings of fruits and vegetables a day, and 29.0% reported being physically inactive. The remaining 71% of respondents reported participating in a physical activity, although only 35.5% of respondents exercised at the recommended activity level of 20 minutes or more on 3 or more days per week. This is slightly less than the state and national reported figures of 35.9% and 37.3%, respectively. The most popular activities among older adults, as reported on the statewide 2000 BRFSS, are walking,

gardening, golf, aerobics, and bicycling. Also in 2000, 6.5% of surveyed adults in Coconino County reported that they are current daily smokers, a slightly lower incidence than reported for the state and the nation, 7.4% and 7.9%, respectively. One of the two daily smokers (50.0%) reported attempts at quitting smoking, with at least 1 day of non-smoking within the past year. This is higher than the state and national rates of 41.3% and 40.9%, respectively, although the small sample size must be considered in evaluating this observation.

**TABLE 3: RISK FACTORS AMONG RESPONDENTS AGE 65 AND OLDER;  
BEHAVIORAL RISK FACTOR SURVEILLANCE SURVEY, 2000**

	Coconino County	Arizona	United States
<b>Weight Group<sup>1</sup></b>			
Normal weight	67.7%	46.8%	42.5%
Overweight	29.0%	35.1%	36.7%
Obese	3.2%	17.0%	16.8%
Unknown	0.0%	1.1%	4.0%
<b>Daily Servings of Fruits and Vegetables</b>			
Less than once a day or never	0.0%	1.4%	3.3%
1 to less than 3 times per day	3.2%	16.8%	21.9%
3 to less than 5 times per day	54.8%	38.8%	43.3%
5 or more times per day	41.9%	42.9%	31.5%
<b>Activity level/exercise<sup>2</sup></b>			
Physically inactive	29.0%	37.5%	37.0%
Less than recommended activity	35.5%	26.6%	25.7%
Meets recommended activity level	35.5%	35.9%	37.3%
<b>Smoking status</b>			
Current smoker, smoke everyday	6.5%	7.4%	7.9%
Current smoker, smoke some days	0.0%	1.9%	2.1%
Former smoker	48.4%	41.3%	37.4%
Never smoked	45.2%	48.7%	52.1%
Don't know/refused question	0.0%	0.6%	0.5%

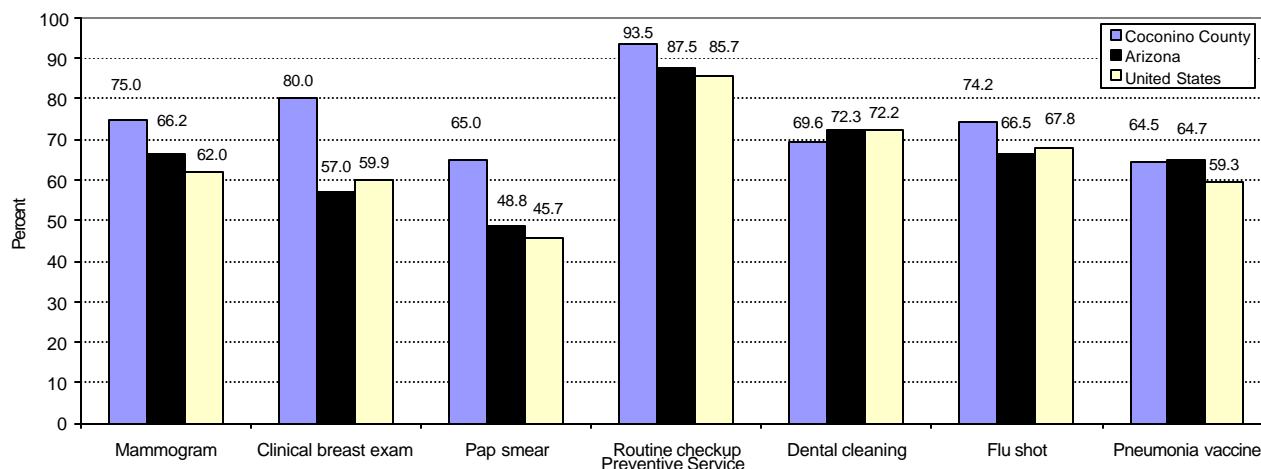
<sup>1</sup>Based on Body Mass Index, BMI<25.0 normal weight, BMI 25.0 and < 30.0 overweight, BMI 30.0 obese

<sup>2</sup>Recommended activity is exercise 3 or more days per week for 20 minutes or more

## Preventive Care

The use of preventive care services provides an effective means for maintaining or improving individual health status, and is especially important for the aging population. Yearly screenings for older adults are recommended for a number of healthcare services. Figure 3 demonstrates the use of such services among those age 65 years and older adults within the past year, as reported on the BRFSS. The percentages for pneumococcal vaccine are reported for individuals receiving the vaccine at any point in their life.

**FIGURE 3: PERCENT OF INDIVIDUALS 65+ BY RECOMMENDED PREVENTIVE SERVICES USE; BEHAVIORAL RISK FACTOR SURVEILLANCE SURVEY, 2000**



With the exceptions of dental cleanings and pneumonia vaccinations, Coconino County reported a higher use of all preventive services than state and national respondents in all categories. Among all survey respondents, obtaining a yearly medical checkup was the highest reported use of a preventive service, with a rate of almost 94% among Coconino County respondents, compared to 87.5% and 85.7% for Arizona and the United States, respectively. Yearly dental cleaning was also highly reported among state and national respondents, a rate of approximately 72% for both regions, and Coconino County respondents reported only slightly lower rates (69.6%). Both Coconino County and the state as a whole exceeded the national rate for obtaining a pneumococcal vaccine, with 64.5% of county and 64.7% of state respondents reporting ever having the vaccine, compared to 59.3% for the United States. An even higher number of respondents in Coconino County (74.2%) reported having a flu shot in the past year, compared to the 66.5% of state respondents and 67.8% for the nation.

In the category of women's health, female respondents in Coconino County again reported a much higher use of preventive services than state and national respondents. Three-quarters of county respondents (75%) reported having a mammogram in the past year, compared to 66.2% for Arizona and 62.0% for the United States. Eighty percent of county respondents received an annual clinical breast exam, compared to less than 60% reported statewide and nationally. Yearly Pap smears were obtained by 65% of Coconino County respondents, compared to 48.8% of state and 45.7% of national respondents.

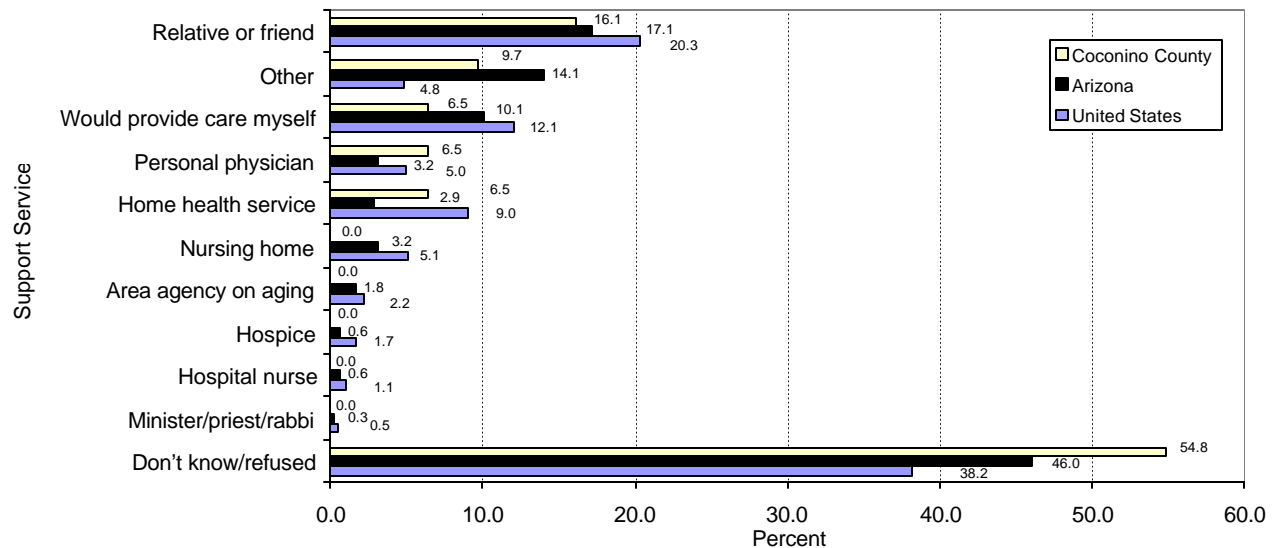
## Mental Health and Support Services

According to BRFSS 2000 data, older respondents in Coconino County reported an average of 3.2 days during the past month when their mental health was “not good”, in comparison to 1.7 days reported for Arizona and 2.1 days reported nationally. When questioned about more specific indicators of mental health status, for example feeling depressed, anxious, or not well-rested, 35.5% of older respondents in Coconino County reported having at least 14 days of poor emotional health within the past month, compared to 23.7% of state and 22.3% of national respondents. While BRFSS data are by no means a clinical diagnosis of mental condition, 14 or more days of poor emotional health may indicate a need to seek professional attention.

Despite the proportion of older BRFSS respondents reporting poor emotional health, ADHS data indicate that only 0.5% of the population aged 60 and older received mental health treatment in 2000 through Regional Behavioral Health Authorities (RBHAs). RBHAs are community-based organizations contracted by ADHS that provide a variety of mental health services, predominately to individuals suffering from serious mental illnesses. Although these data only describe use of public mental health programs excluding treatment provided by private agencies or personal physicians it is nonetheless clear that many older adults in Arizona are not utilizing available mental health support services.

Support services potentially serve an important function in the daily lives of older adults who are unable to care for themselves. However, as shown in Figure 4, based on the 2000 BRFSS, nearly 55% of county and 46% of state respondents did not know who to call for assistance in the event that an elderly friend or relative required care. Although there are public services available to the aging community, only 13% of the older respondents in Coconino County thought of these services as a resource for needed care.

**FIGURE 4: PERCENT OF INDIVIDUALS 65+ BY PLANNED USE OF SUPPORT SERVICES ; BEHAVIORAL RISK FACTOR SURVEILLANCE SURVEY, 2000**



BRFSS 2000: “Who would you call to arrange short or long-term care in the home for an elderly relative or friend who was no longer able to care for themselves?”

Survey participants were also questioned about their own need for assistance with personal care needs (e.g. eating, bathing) or routine needs (e.g. household chores, shopping). Ten individuals responded to these questions in Coconino County. Of those, all 10 people responded that they did not need help with personal care needs. Three individuals responded that they needed assistance with routine tasks; 2 respondents reported help from immediate family members, and the remaining respondent received help from another relative. Public services were not cited by any county respondent, although the small sample size must be considered in evaluating this observation. Statewide and nationally, public services were more frequently mentioned responses. In both regions, use of a paid employee or home health agency was the most often cited public service utilized for both personal care and routine needs.

### ***Healthy Aging 2010***

Working with government agencies, non-profit organizations, and private community-based programs, the Healthy Aging 2010 plan will “connect the dots” to the many activities and programs currently available to meet the needs of older Arizonans. For communities already engaged in health-related projects, it is hoped that this report will provide updated information on older adult health in Coconino County. For communities not yet formally involved in such activities, hopefully this report will encourage interest and dialogue around initiating such projects. To learn more about the Healthy Aging 2010 plan, please contact Ramona Rusinak at (602) 542-1223 or visit the Healthy Aging 2010 website at <http://www.hs.state.az.us/phs/healthyaging2010/index.htm>.

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